

**KANSAS CLEAN AIR ACT ADVISORY GROUP**

**REGISTRATION FORM**

**February 26, 2007 10 A.M. - 3:00 P.M.**

**TOPEKA PUBLIC LIBRARY**

**1515 SW 10<sup>th</sup> Ave.**

**Topeka, KS 66604**

**785-580-4400**

1. Please Print:

Full Name \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Daytime Phone \_\_\_\_\_

2. Registration Fee (lunch included) \$15.00 ☐ Check Enclosed  
Payable to: Kansas Department of Health and Environment  
Mail to: Bureau of Air and Radiation  
Attn: Linda Vandevord  
1000 SW Jackson, Suite 310  
Topeka, KS 66612  
☐ Inter-fund Voucher made out to: KDHE Receipts  
Mail to address above

We encourage you to send a substitute if you cannot attend. No refunds will be made.

**Payment is required at time of Registration. Registrations must be received and paid for by February 19, 2007.** If you have any questions, please call Linda Vandevord at 785-296-6423.